Data Sheet

USAID Mission: Madagascar **Program Title:** Selected Health Services and Products Global Health Pillar: Strategic Objective: 687-005 Status: Continuing Planned FY 2005 Obligation: \$11,315,000 CSH **Prior Year Unobligated:** \$0 Proposed FY 2006 Obligation: \$10,015,000 CSH

Year of Initial Obligation: 2003 Estimated Year of Final Obligation: 2007

Summary: The Health, Population and Nutrition (HPN) Program will increase the use of selected health services and products while improving health knowledge and practices. The program strengthens institutional capacities to develop, implement, and evaluate priority health programs, including Sexually Transmitted Infection (STI) and Human Immune Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS) prevention and management at the national and community levels.

Inputs, Outputs, Activities:

FY 2005 Program: Reduce Transmission and Impact of HIV/AIDS (\$2,000,000 CSH). Increasing mobility and the high rates of partner change threaten to accelerate the spread of HIV/AIDS. USAID is strengthening the organizational and strategic planning capacity of AIDS committees at the national (1) and local level (30). Assistance to AIDS committees will enable them to implement effective behavior change communication activities and track the epidemic with HIV surveillance data. USAID will maintain its innovative social marketing program to increase access to quality STI and HIV testing and counseling services through over 100 private sector clinics and strengthening public sector commodity logistics management. Public sector competency-based training and private physician training improve the quality of health services. Principal contractors and grantees: Chemonics, JHPIEGO (an affiliate of Johns Hopkins), Helen Keller International, Medical Care Development International (MCDI), Georgetown University, Population Services International (PSI), HIV/AIDS Alliance, Family Health International (FHI) and the Centers for Disease Control and Prevention (all prime), Training Resource Group Inc. (subs).

Prevent and Control Infectious Diseases of Major Importance (\$2,300,000 CSH). USAID is providing quality technical assistance to the Ministry of Health and Family Planning (MOHP) to develop national policies and guidelines. Continued support of social marketing operations is expanding mass media and rural outreach education, reinforcing home-based care of uncomplicated malaria, and improving access to effective malaria treatment and insecticide-treated bed nets for children and pregnant women. Competency-based training in medical and nursing schools will improve the quality of health services, and technical assistance to Madagascar's drug agency will advance drug quality assurance. Innovative interventions are improving health and hygiene, linking potable water, health, nutrition and food security, and watershed management. USAID is also expanding access to potable water with simple, affordable treatment solutions, increasing access to clean water, promoting hygiene and sanitation, and improving local water management capacity. Principal contractors and grantees: Chemonics, PSI, Malaria Action Coalition, CARE, and Adventist Development and Relief Agency (ADRA).

Improve Child Survival, Health and Nutrition (\$3,475,000 CSH). To reduce the child mortality rate, USAID is expanding vaccination coverage and Essential Nutrition Actions (ENA), and scaling up prevention, early detection and treatment of childhood diseases under the Integrated Management of Childhood Illnesses (IMCI) approach. USAID is continuing competency-based training in medical and nursing schools for IMCI and ENA and supporting the development of national child health and nutrition policies; improving cold chain and commodity management; supporting mobile health clinics for remote populations; supporting improved use of data for decision making; and continuing to improve the national polio surveillance system. At the community level, USAID efforts engage leaders, link communities with health care providers, mobilize communities to action, and expand outreach and education through

innovative approaches. Principal contractors and grantees: Chemonics (prime), PSI, Linkages, ADRA, MCDI, CARE, CRS, and others to be identified (subs).

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$3,540,000 CSH). USAID is increasing availability of and access to family planning services and products through social marketing and community-based distribution and education; strengthening the public sector commodity management and distribution system and the technical and management capacity of selected family planning health organizations, expanding integrated health, population, and environment interventions in remote biodiverse areas; and improving quality of services, focusing on competency-based approaches in pre-service health professional training institutions and revising public health norms, standards and guidelines. USAID-provided technical assistance to the MOHP is strengthening its capacity to develop, implement and evaluate programs. Principal contractors and grantees: Chemonics (prime), PSI, CARE, CRS, ADRA, Voahary Salama (a consortium of local NGOs) (subs), and others to be identified.

Enhance Food Security of Vulnerable Populations. P.L. 480 Title II food aid program is helping food insecure families maintain nutrition levels. Monetization proceeds from the authorized sale of U.S.-supplied food aid in country are used to help families increase food production and income, and improve maternal and child health. Using community-based field agents and food-for-work activities, the Title II program is increasing the availability of and access to locally produced food by increasing incomes of targeted families and are improving health through nutrition education.

FY 2006 Program: Reduce Transmission and Impact of HIV/AIDS (\$2,000,000 CSH). USAID will continue support for innovative behavior change interventions, maintain access to socially marketed products and services and continue to provide leadership in developing data for decision making. Implementers will remain the same as above.

Prevent and Control Infectious Diseases of Major Importance (\$1,000,000 CSH). Additional infectious disease resources will allow USAID to continue community mobilization and education activities, including assuring access for pregnant women and children to effective malaria prevention and treatment. Implementers will remain the same as above.

Improve Child Survival, Health and Nutrition (\$3,475,000 CSH). USAID will continue to support IMCI immunization, and promotion of ENA and Vitamin A distribution, as well as improvements in the delivery of quality health services. Implementers will remain the same as above.

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$3,540,000 CSH). USAID will continue activities to strengthen commodity distribution systems and community-based distribution, and will maintain community outreach and social marketing activities. Implementers the same as above.

Enhance Food Security of Vulnerable Populations. P.L. 480 Title II-funded activities to improve maternal and child health, nutrition and food security will continue at planned levels. All family planning assistance agreements are incorporating clauses that implement the President's directive restoring the Mexico City Policy.

Performance and Results: The previous strategic objective (SO), which ended in FY 2004, met its targets: contraceptive prevalence increased from 10% in 1997 to 18% in 2003; the Diphtheria, Pertussis and Tetanus immunization rate for children under one year of age improved from 48% in 1997 to 61% in 2003; exclusive breastfeeding rates increased from 22% in 1997 to 67% in 2003. The current SO is on track - national distribution of health products exceeded targets: 529,009 bottles of the safe water solution, SurEau, were sold, above the 518,040 target; 11,357,045 condoms were sold exceeding the target of 11,000,000; and 344,019 insecticide-treated bed nets were sold, surpassing the target of 333,201. Vitamin A distribution of 88% surpassed the 85% target. By the end of the program in 2008, child and maternal health will have been improved in targeted regions, public and private sector capacity to deliver high quality health services will be strengthened at both national and local levels, communities will be mobilized to promote their own health, and essential drugs and medical supplies will be more consistently available in targeted areas.

US Financing in Thousands of Dollars

Madagascar

687-005 Selected Health Services and Products	сѕн	ESF
Through September 30, 2003		
Obligations	8,293	400
Expenditures	505	90
Unliquidated	7,788	310
Fiscal Year 2004		
Obligations	9,357	0
Expenditures	4,921	162
Through September 30, 2004		
Obligations	17,650	400
Expenditures	5,426	252
Unliquidated	12,224	148
Prior Year Unobligated Funds		
Obligations	0	0
Planned Fiscal Year 2005 NOA		
Obligations	11,315	0
Total Planned Fiscal Year 2005		
Obligations	11,315	0
Proposed Fiscal Year 2006 NOA		
Obligations	10,015	0
Future Obligations	19,183	0
Est. Total Cost	58,163	400